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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/520,114
Filing Date	01/03/2005
First Named Inventor	Hugues Gabriel
Art Unit	2168
Examiner Name	Smith, Garrett A.
Attorney Docket Number	089A.0001.U1(US)

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 29683☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:

29683

OR

<input type="checkbox"/> Firm or Individual Name					
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City		State		ZIP	
Country					
Telephone		Email			

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Martin Philip Frechette, Senior IPR Manager		
Date	Dec 17 th , 2009	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Statement Under 37 C.F.R. 3.73(b)

Owner: Amadeus S.A.S.

Application No.: 10/520,114

Amadeus S.A.S.
(Name of Assignee)

a corporation
(Type of Assignee)

states that it is:

the assignee of the entire right, title and interest in:

the patent application by virtue of assignment(s) from the inventor(s) of the patent application(s).

The assignments were recorded in the United States Patent and Trademark Office on the Reel and Frame numbers 016956/0696, on 1/3/2005.

The undersigned is authorized to act on behalf of the assignee.


Martih Philip Frechette
Title: Senior IPR Manager

Dec 17th 2009
Date

089A.0001.U1(US)

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